

PTO/SB/01 (10-01)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:

☐ Customer Number
or Bar Code Label

26734

OR ☐

Correspondence address below

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Address Quarles & Brady LLP

Address P O Box 2113

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ZIP 57301-2113

Country US

Telephone 608/251-5000

Fax 608/251-9166

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

Frederick R.

(first and middle [if any])

Family Name Blattner
or SurnameInventor's
Signature*Frederick R. Blattner*

Date

12/18/03

Residence: City Madison

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Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

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Signature*Gyorgy Posfai*

Date

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State

ZIP 6727

Country Hungary

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Country US	Telephone 608/251-5000	Fax 608/251-9166	
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NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Frederick R.		Family Name (last name or Surname) Blattner	
Inventor's Signature		Date	
Residence: City Madison	State WI	Country US	Citizenship US
Mailing Address 1547 Jefferson Street			
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature <i>Gyorgy Posfai</i>		Date 01/13/04	
Residence: City Szeged	State	Country HUNGA	Citizenship Hungary
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City Szeged	State	ZIP 6727	Country Hungary
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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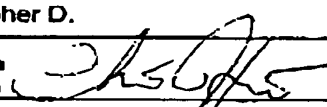
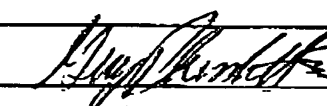
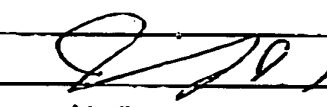
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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Christopher D.		Herring	
Inventor's Signature 		Date 12-16-03	
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Given Name (first and middle (if any))		Family Name or Surname	
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Inventor's Signature 		Date 12/19/03	
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Mailing Address			
City Madison	State WI	ZIP 53711	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jeremy		Glasner	
Inventor's Signature 		Date 12/17/03	
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Mailing Address			
City Madison	State WI	ZIP 53706 53703	Country US

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DECLARATION**ADDITIONAL INVENTOR(S)
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Trevor		Twose	
Inventor's Signature <i>[Signature]</i>		Date <i>18 Dec 2003</i>	
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Mailing Address <i>1500 Cambridge Street 2389 Hwy 111</i>			
Mailing Address <i>[Signature]</i>			
City <i>Madison</i>	State <i>WI</i>	ZIP <i>53711 53575</i>	Country <i>US</i>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
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Mailing Address			
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